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**Testimony of Assemblymember Deborah J. Glick
Before Landmarks Preservation Committee
Regarding St. Vincent's/Rudin Development
April 1, 2008**

St. Vincent's Hospital and Rudin Development submitted an application to the Landmarks Preservation Commission (LPC) that requests permission to demolish buildings in the Greenwich Village Historic District and replace them with a new hospital and luxury condominiums that are substantially larger and bulkier than the surrounding buildings in the neighborhood. In evaluating this proposal, LPC must consider the appropriateness of both the demolition of these landmarked buildings and their planned replacements. In doing so, I urge you to keep in mind that what you decide today could have drastic consequences for historic districts throughout the city.

The importance of historic districts cannot be overstated. In a rapidly-changing city driven primarily by commerce, the past is shown too little regard. If we as a city do not protect and preserve the past, then it surely will evaporate into a landscape dominated by characterless glass buildings that have little relation to the neighborhoods that surround them.

Greenwich Village's unique character is rooted in its past. The desire to protect this past has compelled hundreds of residents to write to my office and has led me to testify today to express similar concerns. Furthermore, I am concerned about the precedent this application might set if it is approved before significant changes are made. Allowing the razing of nearly an entire city block in a historic district would run counter to LPC's mission and send a citywide message that historic districts exist in name only. This cannot be allowed to occur.

The Greenwich Village Historic District was created in 1969 because public officials recognized that the historic nature of this neighborhood was a valuable resource that must be preserved. The blocks encompassing the buildings proposed for demolition were not randomly included in the Historic Designation Report; rather, they were selected to be there. Since so many other parts of Greenwich Village were unfortunately not included in the Historic District, every effort must be made to protect the areas that were chosen. Although I am supportive of St. Vincent's and recognize their need to create a state-of-the-art modern hospital, I am also concerned about the preservation of the district. In fact, the loss of even a single building within a historic district is of great concern to me.

Within the project being considered today, the Smith Raskob, Nurses, Reiss and Spellman buildings need to be preserved. These landmarked buildings were some of St. Vincent's earliest, and helped to tell the tale of the hospital's evolution. From Spellman's magnificent entrance to Nurses' ornamental metal marquee, these buildings are important pieces of the landmark district and must be preserved.

In addition to demolishing individual buildings which ought to remain protected, new development in historic districts can also greatly change the character of the entire district. The proposed height and bulk of the Rudin residential development tower on the East Side of 7th Avenue is particularly inappropriate. It is massive, aesthetically unappealing, and does not conform to the style of the neighborhood. It must be significantly scaled back and redesigned and I urge LPC to work with the developer to do so. The townhouses proposed as part of this development, while appropriate in size, are dwarfed by the enormous development at the end of the block, which will render their more appropriate scale all but meaningless. The ideal redevelopment of this site would creatively combine new development while reusing existing landmarked buildings.

In closing, I wish to thank the Landmarks Preservation Commission for the care that it has shown in considering this matter. I urge you not to approve this plan in its current form and hope you will continue to work diligently to protect the storied history of the district and act in a manner that does not endanger other historic districts in the future.



News from...

SENATOR THOMAS K. DUANE

29th SENATORIAL DISTRICT • NEW YORK STATE SENATE



TESTIMONY BY NEW YORK STATE SENATOR THOMAS K. DUANE
BEFORE THE NEW YORK CITY LANDMARKS PRESERVATION COMMISSION'S
HEARING ON CERTIFICATES OF APPROPRIATENESS
FOR THE ST. VINCENT'S HOSPITAL REDEVELOPMENT

April 1, 2008

My name is Thomas K. Duane and I represent New York State's 29th Senate District, in which St. Vincent's Hospital ("St. Vincent's") and the Greenwich Village Historic District are located. Thank you for the opportunity to present testimony before the New York City Landmarks Preservation Commission (LPC) today.

The applications before LPC are to garner Certificates of Appropriateness for the demolition of nine buildings in the Greenwich Village Historic District and the construction of a new hospital, townhouses and apartment buildings in their place as well as the alteration of the current Materials Handling Center at 76 Greenwich (The Triangle site).

First of all, let me say that this redevelopment proposal is large and unprecedented, and is understandably one of great concern to me and my constituents. The demolition of nine buildings, regardless of what replaces them, will result in a significant change to the landscape of this historic district. I appreciate the applicants meeting early and frequently with myself, my colleagues and the community to present their plans and solicit our thoughts on this project. Moreover, I am grateful to the thousands of community members who have provided feedback regarding this project through numerous meetings, public hearings, letters, emails and the internet survey that I sponsored along with Congressman Nadler and Community Board Two (CB2).

St. Vincent's Hospital serves an area that stretches from the Battery all the way up to Hell's Kitchen, and houses the only Level 1 Trauma Center serving both the West Side and Lower Manhattan. I value the services St. Vincent's has been providing to this area for over 150 years and believe its vitality is critically important for this community. I am sympathetic to the need for a new state-of-the-art hospital; however, I have reservations about the current applications.

In its March 20, 2008 resolution to LPC, CB2 laid out a thoughtful critique of this proposal, calling for the preservation of several historically significant buildings, careful consideration of others planned to be demolished, and the submission by the applicant of new plans for review as to their appropriateness. While I do not completely concur with the Board's resolution, I would like to emphasize for LPC my shared concerns.

As does CB2, I believe the Smith Raskob, Nurses Residence, Reiss and Spellman buildings are historically relevant and embody the evolution of St. Vincent's Hospital. These architecturally appropriate buildings were built between 1924-1954, are composed of brick and limestone and are all individually listed in the Greenwich Village Historic District Designation Report. The report states that despite their size, they "generally conform with the houses in the adjoining streets." Nurses Residence is of particular note, with its decorated arched windows, ornamental metal marquee over the front door, and its terracotta ornament of the side door. In addition, the Cronin building is a rare example of modernist style architecture in Greenwich Village. Built in the 1960s, it contributes to the variety of buildings in this district. The historical and cultural significance of all these buildings should be given careful consideration.

I am also greatly concerned about the appropriateness of the buildings proposed to replace those on the East side of 7th Avenue. In particular, I feel that the proposed 265' residential tower on the avenue is inappropriate for this historic district, which is known for the human scale of its buildings. This large residential building would overwhelm the small, intimate structures in the surrounding area.

Like the residential building, the proposed new hospital building will be visible from quite a distance and will drastically change the skyline of this area. Nevertheless, I cannot dismiss the fact that this facility will provide life-saving medical care for much of my Senate District. Though I understand that it is not the purview of LPC to consider use, even the designation report states, "These hospital buildings [on W. 12th Street] perform a useful function for the entire community." Moreover, I acknowledge the great care that the architects took in drawing up plans for the new hospital building, as its unique design is a strong attempt to show sensitivity to the surrounding neighbors. Although the proposed hospital will not blend in with the surrounding buildings in shape or orientation, the architects made an effort to lessen the impact of the bulkiness through the use of setbacks and the building's ovoid shape. I am not qualified to comment on the medical need for the configuration of the building; however St. Vincent's has compellingly argued that the proposed hospital building offers the most efficient way to fulfill its mission of providing medical care with respect, integrity, compassion and excellence.

As for the Triangle Site, the proposed alteration to the Material's Handling Center appears appropriate but the proposed park at this site needs to be planned in more detail. St. Vincent's has failed thus far to provide and maintain a meaningful and public open space and should work with the community in the future to shape more detailed plans for this space.

I appreciate St. Vincent's and Rudin participating in numerous meetings throughout the last several months. Throughout this time, they have heard loud and clear that preservation has not been a priority in these plans and the proposed buildings are too tall and bulky. I, therefore, cannot support the applications in their current state. I believe that the goals and mission of the hospital can be balanced with concerns of the community and I will continue to work with the applicants, the community, my colleagues and LPC toward that end. Thank you for allowing me to testify today and for your consideration of my recommendations.

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Web: <http://www.house.gov/nadler>**TESTIMONY OF JERROLD L. NADLER
Before the Landmarks Preservation Commission
Re: St. Vincent's Catholic Medical Center****April 1, 2008**

Good morning Chairman Tierney and members of the Landmarks Preservation Commission. Thank you for holding this important hearing to discuss the application before you concerning St. Vincent's Catholic Medical Center. St. Vincent's Catholic Medical Center has a long and important history in Greenwich Village and is part of the fabric of the community that I represent in Congress. I am grateful for its commitment to the neighborhood and improving the quality of medical care for the entire City. It is because of the importance of St. Vincent's to the Village and Lower Manhattan and downtown neighborhoods, that I support its effort to continue to modernize, improve and grow for future generations for all New Yorkers.

While I fully support St. Vincent's need to expand and create a world class hospital for the 21st century I have a number of concerns regarding the redevelopment as proposed. I will limit my comments to the purview of the Landmarks Preservation Commission. As we are all well aware, St. Vincent's resides entirely in the Greenwich Village Historic District and therefore this application requires careful examination and consideration. Currently, St. Vincent's proposes to demolish their entire campus of buildings, which consists of nine buildings as well as the Triangle site located on Seventh Avenue South and West 12th and West 13th Streets. Two buildings, Link, Coleman and the Triangle site were all built as replacement buildings under a Large Scale Community Facility Development ("LSCFD") plan of August 1979. These buildings are not particularly notable architecturally and could be demolished without significant impact on the Greenwich Village Historic District. However, the remaining seven buildings which include Smith-Raskob, Nurses, Reiss, Spellman, Cronin and O'Toole are noted in the 1969 designation report and should be considered with greater vigilance in order to preserve their contribution to the Historic District. It is my belief that the preservation of some of these buildings, particularly the red brick buildings on the east side of Seventh Avenue, is important and will serve to maintain the character of the Greenwich Village Historic District.

It is my belief that the O'Toole site (20 Seventh Avenue) because of its location on a wide and major trafficked avenue is the most appropriate site for the new hospital, and I support the demolition of O'Toole in order to construct a new state of the art hospital facility. However, the proposed height of the new hospital building is of great concern to me and the community. Understanding that no hospital built today would be the same as one built 40 years ago and recognizing that healthcare delivery has changed, it is imperative to consider the sensitivities that

arise in this particular location given its presence in the Greenwich Village Historic District. While I appreciate the developer's consideration of the neighbors in respect to the street-wall and views, I believe that the building as currently proposed, over 300 feet tall (including mechanicals) could dramatically and negatively affect the Greenwich Village Historic District. That said it is important to note that the Hospital serves a critical public need and its location in Greenwich Village should not be compromised. St. Vincent's should make every effort to move all nonessential services off site in order to decrease as much as possible the overall footprint necessary for the new hospital. I am committed to working with both the Hospital and the community to ensure an outcome that is acceptable to both parties. Ultimately, we need a fully functioning, state of the art hospital in which quality of care is not compromised at the expense of the Hospital's presence in the Historic District.

In considering the proposal for the residential development on the east side of Seventh Avenue, I again have a number of concerns. The issue on this site is the overall height of the development as well as the demolition of the entire St. Vincent's campus including Smith-Raskob, Nurses, Reiss, Spellman and Cronin which are all individually named in the 1969 designation report. Part of the charm of Greenwich Village is its low rise buildings and while I generally agree that larger buildings are appropriate on the avenues, at approximately 265 feet (including mechanicals) the proposed buildings by the developer will dominate the surrounding buildings within the historic district of Greenwich Village. Moreover, the building's large street-wall, comprising of almost the entire avenue between Eleventh and Twelfth Streets is of particular concern. In demolishing all of the buildings on the east side of Seventh Avenue this proposal fails to preserve the history of the hospital as told through these structures. It is my hope that this Commission will seriously consider the preservation of some of these buildings that help to tell the story of this dynamic neighborhood and require that the developer incorporate these buildings into the redevelopment of the site.

Finally, there are other concerns that are not within the purview of this Commission but deserve mention. The Hospital has failed to make good on their promises regarding the Triangle site. It is imperative that these promises are upheld and that the community plays a significant role in the management of this open space. Furthermore, with the creation of residential units on the east side of Seventh Avenue every opportunity to make these units affordable must be explored and all actors must seriously consider the impact on the existing infrastructure including our public schools which are already overcrowded and our public transportation facilities. Further, it is my hope that St. Vincent's continues its efforts in working with the community on issues that will arise as this process moves forward, including construction mitigation.

Most importantly, this decision by the Landmarks Preservation Commission must consider any precedent that may be set with its decision. Historic Districts serve to tell the stories of our past and are a wonderful asset in any city. While St. Vincent's is the only hospital entirely within a Historic District we must not lose sight of other institutions that are faced with similar situations. With the increasing cost of real estate in New York City non-profits will continue to make use of their land assets, it is critical that the LPC handles these cases with the careful consideration that they deserve to ensure the preservation of Historic Districts citywide.

I thank you for the opportunity to testify before you here today, I look forward to hearing the testimony of my colleagues and members of the community.



THE CITY OF NEW YORK
OFFICE OF THE PRESIDENT
BOROUGH OF MANHATTAN

SCOTT M. STRINGER
BOROUGH PRESIDENT

Testimony on
St. Vincent's Hospital's New Replacement Hospital and Residential Development
Public Hearing of the Landmark Preservation Commission
April 1, 2008

Thank you Chair Tierney and Commissioners for the opportunity to speak today on Saint Vincent Hospital's plans to redevelop its Greenwich Village properties.

Faced with the challenge of delivering first-rate medical care in buildings that were built as early as the 1920s, Saint Vincent's Hospital has created a plan to build a new replacement hospital with state-of-the-art facilities. The hospital's plans call for the demolition of its entire complex, replacing the former National Maritime Union building (now known as O'Toole Pavilion) on the west side of Seventh Avenue with a hospital tower, upgrading the hospital's receiving center and the open space on the triangle south of 12th Street, and creating a new residential development on the east side of the avenue. Under any circumstances, this is an ambitious undertaking. Not only must the hospital manage the logistics of continuing medical services throughout the modernization process, but as the only hospital in the city lying entirely in a historic district, its plan must also be carefully designed to fit its historic setting.

At numerous public meetings held over the past year by Community Board 2 and the Saint Vincent's Working Group, and in other meetings at my office with various community members, I have heard the many views from all sides about the future of Saint Vincent's. I have heard the serious and legitimate concerns from Greenwich Village residents and the historic preservation community about the serious impact they feel the development would have on the character and history of the City's first historic district.

I have also met with representatives of Saint Vincent's and the Rudin Company, the hospital's partner in this proposal. I clearly understand the hospital is in desperate need of new facilities and simply cannot continue unless it has new facilities. I support their need to modernize. The current layout is inadequate and far too outdated to accommodate 21st century equipment and the highest level of care we expect from our hospitals. In fact, both opponents and supporters of the plan have voiced their support for the hospital's continued existence. This is not surprising, since Saint Vincent's is known first and foremost for its good work. For example, the hospital is a Level-1 trauma center serving neighborhoods from Midtown to Downtown, and it provides free health care for many of our most vulnerable citizens.

The Commission, and all of us, must attempt to strike the appropriate balance between our concern for the historic district and the undeniable need to support the hospital's critical mission. It is important to note that the zoning and other regulations governing development in historic districts act solely to preserve the history of our city and protect the health and well-being of our neighborhoods. These laws provide the framework and opportunity to find balance and compromise, and to protect special neighborhoods by managing growth within them.

Saint Vincent's proposed new hospital building would certainly be distinctive. It would require the demolition of O'Toole Pavilion and its 329-foot tower would stand high above surrounding buildings. However, there is a sense in which the building itself is an acknowledgment to the block's unique placement in Manhattan. While it would be significantly larger than the building it would replace, the tower's orientation and ovoid form has been carefully designed to reference the unique street condition created by the convergence of the Randall's and the Greenwich Village historic grid systems. The tower's placement creates a sense of openness and optimizes air and light, while its base, terracotta façade and plantings at the setback and podium levels allow for a greater architectural connection to neighborhood's characteristic scale, masonry structures and tree-lined streets. However, the Commission should continue to hear from the community and work to refine a plan for the hospital building that respects that is sensitive to the community's needs and the district's character.

The plan also includes the redevelopment of the hospital's receiving center on the triangle south of 12th street. This aspect of the plan represents an opportunity to involve the community in creating new quality neighborhood-oriented open space. The open space that currently exists provides little public benefit, and the structure housing the hospital's receiving area lacks any attractive design considerations. By refurbishing the underused open space as a public park and creating additional publicly accessible green space on the roof the new receiving center, this triangle could become a real neighborhood resource.

The residential component of the hospital's proposal is more problematic. Plans call for the sale of all of the hospital's properties east of Seventh Avenue for the development of a 266-foot residential building. The tallest portion of the development would front the avenue and have mid-block extensions along 11th and 12th streets that step-down to rows of 5-story townhouses. While the shape of this development takes a form commonly found in Manhattan, I have serious concerns about how this aspect of the proposal relates specifically to the Village.

As currently designed, the proposed residential development would not be appropriate in the Greenwich Village Historic District. The application should be modified to:

- **Preserve buildings.** The plan calls for the unprecedented demolition of eight buildings occupying more than half of a block in a historic district. Several of these buildings have been singled out for their elegance and contribution to the neighborhood's character. Although they vary from the Village's traditional low-rise form, the masonry and style of these buildings attempt to blend into the historic district. Further, they tell the history of not only the Village, but also of Saint Vincent's Hospital. The Commission should not allow them all to be lost.

- ***Lower the height.*** The avenue frontage of the residential development would rise higher than all other apartment buildings in the immediate area, and perhaps higher than any other in the district. Although tall "bookend" buildings are familiar in the northern portion of the neighborhood, they do not reflect the character south of 12th Street where much lower buildings prevail. The Commission must find an appropriate middle ground between low-rise buildings to south and the taller apartment buildings to the north.
- ***Redistribute the bulk (avenue frontage).*** The avenue portion of the proposed development is a tall slab with significant visual impact. The width of this portion of the building is nearly 200 feet – wider than the apartment buildings to the north – and acts as a barrier to the sky and the Village skyline. The Commission should seek to adjust the width of this portion of the building above its base, possibly by reallocating bulk to the mid-block.
- ***Redistribute the bulk (mid-block areas).*** The townhouse form of the mid-block extensions of the proposed development attempts to acknowledge the physical character of the block, which dates from at least the 1880's. However, this lower form misses the more interesting historical context of the block. Throughout the century the original low-rise buildings were replaced to create Saint Vincent's Hospital. The Commission should seek to retain a more mid-rise form in the mid-block area where preservation is not feasible or not historically relevant.

While I do not agree with every aspect of the current proposal, I believe it is possible to develop a new hospital within a framework of balance and compromise. This project began with transparency and a high level of public participation. The community's input and participation has already improved the plan, and I commend the Saint Vincent's Hospital team and the Rudin Company for their commitment to openness.

Still, we have some work to do before this is an acceptable proposal for the future of the Village and the City. I look forward to collaborating with the Commission, the community and other elected officials to refine the redevelopment plan in ways that will sustain a 150 year-old local institution and protect one of the City's most renowned and important historic districts.

Thank you.

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